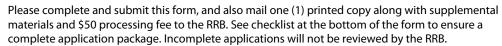
Research Review Board Modification & Continuing Review Application





Chicago Public Schools Office of Accountability Attn: RRB 42 W. Madison Street Chicago, Illinois 60602 Phone: 773-553-4444 www.cps.edu/research/

Date:	RRB Project ID#:	42 W. Madi Chicago, Illir Phone: 773
Proposal Title:		www.cps.edu
Subject:	Original Approval Date:	
Application type(CPS Board Contracted Yes Research Proposal? No	
Primary Contact:		
Organization:		
Address:		
City:	State: Zip Code:	
Phone:	Email:	
Proposed Study Participants	Students Proposed Number and List Teachers Other Staff Parents Proposed Sumber and List Schools:	
Executive Summary or Abstract:		
Study Timeline (note any and all changes to original):		

Description of Research Activities and Preliminary Results to Date:	
Indicate Proposed Modification(s):	Research Question or Hypothesis Study Timeline Study Population Recruitment Methods or Advertising Study Methodology and/or Research Activities Consent Form(s) or Consent Process Survey/Instrument(s) Type of Data Collected Other None
Detailed Explanation of Indicated Modification(s):	
Modification & Continuing Revie Application Checklist:	Application Form Updated signed Institutional Review Board approval letter Updated survey or other instruments (if applicable) Updated informed consent forms for parents and/or teachers as appropriate (if applicable) Updated informed consent forms for students ages 18 or over as appropriate (if applicable) Updated assent form for 6th grade/age 12+ students (if applicable) Processing Fee of \$50.00